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** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	/SHAY LYNN KARLS/ Examiner's Signature	Initials		JAPAN	14	72	5

ADDRESS

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TITLE

Electric blower

FILING FEE RECEIVED 2034	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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